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Bib Data Sheet

CONFIRMATION NO. 8342

SERIAL NUMBER 10/044,802	FILING DATE 01/11/2002	CLASS 701	GROUP ART UNIT 3663	ATTORNEY DOCKET NO.
	RULE			

APPLICANTS

Seymour Levine, Culver City, CA;

Kevin Cotton Baxter, Santa Clarita, CA;
Ken Scott Fisher, Los Angeles, CA;

** CONTINUING DATA *1/2002* *TC*

** FOREIGN APPLICATIONS *None* *TC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/06/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after <i>allowance</i>	CA	4	59	10
Verified and Acknowledged <i>Ken Fisher</i>	<i>Initials</i> <i>TC</i>				

ADDRESS

Ken Fisher
5528 Vineland Ave.
North Hollywood , CA
91601

TITLE

Low cost inertial navigator

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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**** CONTINUING DATA** *No or ****

**** FOREIGN APPLICATIONS** *No or ****

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**** 06/06/2002**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>allowance</i>	CA	4	59	10
Verified and Acknowledged <i>Levans</i>	<i>TC</i> Examiner's Signature Initials				

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APPLICANTS

Seymour Levine, Culver City, CA;
 Kevin Cotton Baxter, Santa Clarita, CA;
 Ken Scott Fisher, Los Angeles, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/06/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

33036

TITLE

Low cost inertial navigator

FILING FEE RECEIVED 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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